

MTF Formulary Management for Overactive Bladder (OAB)

Department of Defense Pharmacoeconomic Center

Uniform Formulary Decision: The Director of TMA has approved the recommendations from the 14 February 2006 DoD P&T Committee meeting regarding formulary status of overactive bladder drugs on the Uniform Formulary (UF) and Basic Core Formulary (BCF). Conversion from non-formulary agents to a BCF or UF drug or establishment of medical necessity may commence 26 April 2006 and must be completed by 26 July 2006.

Uniform Formulary (UF) Agents		Non-Formulary (NF) Agents
OAB drugs on BCF MTFs <u>must</u> have on formulary	OAB drugs not on BCF MTFs <u>may</u> have on formulary	OAB drugs <u>must not</u> have on formulary
Oxybutynin IR (Generic) Tolterodine SR (Detrol LA)	Oxybutynin SR (Ditropan XL) Solifenacin (Vesicare) Darifenacin (Enablex)	Oxybutynin Patch (Oxytrol) Tolterodine IR (Detrol) Trospium (Sanctura)

- The BCF agents, oxybutynin immediate release (IR) and tolterodine sustained release (SR), are the most cost-effective agents.
- When similar dosage forms of OAB drugs are compared (IR to IR; SR to SR), the side effect profiles are similar. The IR formulations are associated with more anti-cholinergic side effects than the SR formulations.
- Solifenacin, darifenacin, and trospium do not have substantially lower rates of dry mouth but are associated with more constipation compared to oxybutynin SR and tolterodine SR.
- MHS persistence rates with all OAB drugs in this class are very low, ranging between 5% (oxybutynin IR), and 16% (tolterodine SR) at the end of a one-year evaluation period.
- Though usually prescribed on a daily basis, patients may be using OAB drugs on a PRN basis to avoid the anti-cholinergic side effect profile. The IR dosage formulation may be used to shorten the duration of side effects.
- Oxybutynin IR and SR formulations are approved for use in children.
- Non-formulary OAB drugs are the least cost-effective agents. MTFs should only dispense NF Drugs for patients who cannot be treated with BCF/UF OAB drugs. MTFs must use the medical necessity criteria established by the DoD P&T Committee. The criteria are available on the TRICARE Pharmacy website: <http://www.tricare.osd.mil/pharmacy/medical-nonformulary.cfm>. A Microsoft Word version of the TMOP/TRRx Medical Necessity form adaptable for MTF use is available on RxNET.

Overactive Bladder Drug Dose and MTF Price Comparison		
Drug & Dosage Form	Weighted average daily cost per day of treatment (January 2006) ^{ab}	
Basic Core Formulary OAB drugs	MTF Costs	System Cost ^c
Oxybutynin IR (Generic)	\$0.04	\$0.12
Tolterodine SR (Detrol LA)	\$1.32	\$2.07
Other Uniform Formulary OAB drugs available for inclusion on MTF formularies		
Solifenacin (Vesicare)	\$1.05	\$1.87
Darifenacin (Enablex)	\$1.14	\$1.87
Oxybutynin SR (Ditropan XL)	\$1.80	\$2.41
Non-formulary OAB drugs		
Oxybutynin Patch (Oxytrol)	\$1.46	\$2.15
Tolterodine IR (Detrol)	\$1.85	\$2.28
Trospium (Sanctura)	\$1.58	\$1.93

^a Post-decision prices; actual price may vary slightly due to MTF-specific Prime Vendor discounts and/or fees

^b MTFs are prohibited from entering into any incentive pricing agreements in any form with OAB drug pharmaceutical manufacturers to receive additional discounts.

^c System costs are the average weighted daily cost across all 3 points of service.

References

- For the full clinical review of the OABs and for discussion about UF decisions, log onto RxNET (the PEC's webforum) www.dodrxnet.org (under "File Library" forum, "DoD P&T Library" folder).
- Current/future drug classes under review by the DoD P&T Committee: www.pec.ha.osd.mil/PT_Committee.htm
- TRICARE website for information on the Uniform Formulary: www.tricare.osd.mil/pharmacy
- TRICARE Formulary Search Tool: www.tricareformularysearch.org

POC: For more information email: PECUF@amedd.army.mil.